

PEACE OFFICER INVOLVED INJURIES OR DEATH REPORT

As required by Art. 2.139 of the Texas Code of Criminal Procedure, law enforcement agencies shall report all officer-involved injuries or deaths caused by the discharge of a firearm. Pursuant to the requirements of Art. 2.139, the following reporting form has been created for reporting such incidents.

"Officer-involved injury or death" means an incident during which a peace officer discharges a firearm causing injury or death to another." Art. 2.139 Gode of Criminal Procedure.

Email or Fax completed form to: officershootingreport@texasattorneygeneral.gov or Fax (512)463-9912

DATE OF REPORT 01/18/2016	
AGENCY/FACILITY INFORMATION	
Name of Agency/Facility San Antonio Police Dept	
Address 315 S Santa Rosa	
_{City} San Antonio	Zip Code 78207
Telephone Number (210) 207-7635	
Signature of Director of Agency/Facility (Required)	UM S
Name of Person Filling Out Form Det. A. Howard 2063	
Email of Person Filling Out Form andrew.howard@sanantonio.gov	
	8. WHAT WAS THE PEAGE OFFICER'S GENDER?
1. WHAT WAS THE INJURED OR DECEASED'S GENDER?	Male Female
✓ Male	Maie Female
2. WHAT WAS THE INJURED OR DECEASED'S AGE AT TIME OF INCIDENT?	9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?
27 □ Not Available	26
3. WHAT WAS THE INJURED OR DECEASED'S RACE/ETHNICITY? (Mark one based on information reported on state driver license application, state identification card application, or other government reported identification if available	10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY? (Mark only one)
and known. If not available, mark not available.)	☐ American Indian ☐ Black or African American
☐ American Indian ☐ Black or African American	or Alaska Native 📈 Hispanic or Latino
or Alaska Native	☐ Anglo or White ☐ Other
☑ Anglo or White ☐ Other	☐ Asian or Pacific Islander
☐ Asian or Pacific Islander ☐ Not Available	11. DURING THE INCIDENT, PEACE OFFICER WAS:
4. DATE OF INCIDENT	☑ On Duty ☐ Off Duty
Month January Day 17 Year 2016	12. PEACE OFFICER WAS RESPONDING TO CALL OR REQUEST WITH ONE OR MORE OFFICERS:
5. LOCATION OF INCIDENT Street address 5639 Old Hwy 90 W	✓ Yes □ No
City San Antonio	
County Bexar Zip 78227	13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:
County BOXEI ZIP TOZZI	☑ Emergency Call or Request for Assistance
6. INCIDENT RESULTED IN:	☐ Traffic stop
☐ Injury	Execution of a warrant
7. INJURED OR DECEASED PERSON:	Hostage, barricade, or other emergency situation
✓ Carried, exhibited or used a deadly weapon	Other – Specify type of call
Did not carry, exhibit or use a deadly weapon	